

Entered - 07/19/01 - sb  
CL01L0458 - DIANNE C. MITCHELL

01- *L*-1251

CLAIM OF: PPG AUTO GLASS,  
through its insurance carrier,  
GE Capital Fleet Services  
Three Capital Drive  
Eden Prairie, MN 55344

For damages alleged to have been sustained as a result of a vehicular  
accident on April 24, 2000 at Interstate 75/85 and Martin Luther  
King, Jr. Drive.

THIS ADVERSED REPORT IS APPROVED

BY: *Rosalind Rubens Newell*  
ROSALIND RUBENS NEWELL  
DEPUTY CITY ATTORNEY

## DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 01L0129

Date: August 1, 2001

Claimant /Victim MR. AND MRS. JAMES CALDWELL AND JAMES CALDWELL, JR.

BY: (Atty) Richard W. Hendrix

Address: 225 Peachtree Street, NE, 1700 South Tower, Atlanta, Georgia 30303

Subrogation: Claim for Property damage \$ Bodily Injury \$ Not Stated

Date of Notice: 02/19/01 Method: Written, proper X Improper       

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 11/26/00 Place: Atlanta Civic Center

Department PRCA Division: Cultural Affairs

Employee involved        Disciplinary Action:       

NATURE OF CLAIM: The claimants allege their son, James Caldwell, Jr. was injured when he fell into the orchestra pit at the Atlanta Civic Center. The claimants have filed a lawsuit to resolve the issues raised in their claim.

### INVESTIGATION:

Statements: City employee        Claimant        Others        Written        Oral       

Pictures        Diagrams        Reports: Police        Dept Report X Other       

Traffic citations issued: City Driver        Claimant Driver       

Citation disposition: City Driver        Claimant Driver       

### BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial       

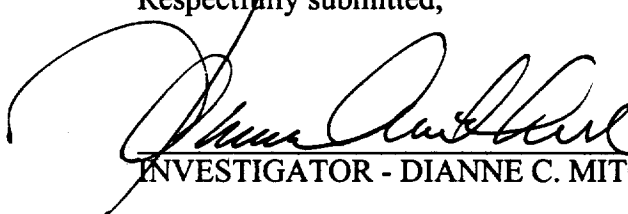
Improper Notice        More than Six Months        Other X Damages reasonable       

City not involved        Offer rejected        Compromise settlement       

Repair/replacement by Ins. Co.        Repair/replacement by City Forces       

Claimant Negligent        City Negligent        Joint        Claim Abandoned       

Respectfully submitted,

  
INVESTIGATOR - DIANNE C. MITCHELL

### RECOMMENDATION:

Pay \$        Adverse X Account charged: 1A01        2J01        2H01       

Claims Manager:  Concur/date 08-01-01

Committee Action:        Council Action

**DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY**

Claim No. 01L0458

Date: July 30, 2001

Claimant /Victim PPG AUTO GLASS  
BY: (Ins. Co.) GE Capital Fleet Services  
Address: Three Capital Drive, Eden Prairie, MN 55344  
Subrogation: X Claim for Property damage \$ 1,927.49 Bodily Injury \$ \_\_\_\_\_  
Date of Notice: 07/19/01 Method: Written, proper X Improper \_\_\_\_\_  
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) \_\_\_\_\_  
Date of Occurrence 04/24/01 Place: Interstate 75/85 and Martin Luther King, Jr. Drive  
Department Fire Division: \_\_\_\_\_  
Employee involved David A. McLane Disciplinary Action: No Action Taken

**NATURE OF CLAIM:** The driver of another vehicle changed lanes improperly, struck the City vehicle, who was then forced out of his lane and struck the claimant's vehicle. The investigation determined that the driver of the City vehicle was not a fault for this accident. Furthermore, the claim as presented does not comply with the requirements of notice as set forth in O.C.G.A. §36-33-5, the six month statute of limitations expired prior to receipt of the claim.

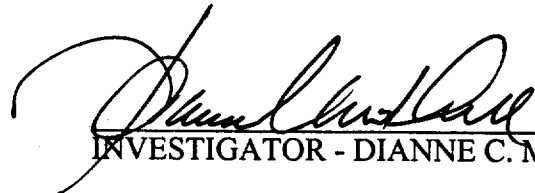
**INVESTIGATION:**

Statements: City employee \_\_\_\_\_ Claimant \_\_\_\_\_ Others \_\_\_\_\_ Written \_\_\_\_\_ Oral \_\_\_\_\_  
Pictures \_\_\_\_\_ Diagrams \_\_\_\_\_ Reports: Police X Dept Report X Other \_\_\_\_\_  
Traffic citations issued: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_  
Citation disposition: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_

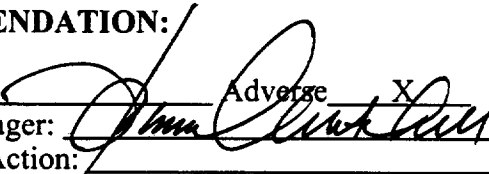
**BASIS OF RECOMMENDATION:**

Function: Governmental X Ministerial \_\_\_\_\_  
Improper Notice \_\_\_\_\_ More than Six Months X Other X Damages reasonable \_\_\_\_\_  
City not involved \_\_\_\_\_ Offer rejected \_\_\_\_\_ Compromise settlement \_\_\_\_\_  
Repair/replacement by Ins. Co. \_\_\_\_\_ Repair/replacement by City Forces \_\_\_\_\_  
Claimant Negligent \_\_\_\_\_ City Negligent \_\_\_\_\_ Joint \_\_\_\_\_ Claim Abandoned \_\_\_\_\_

Respectfully submitted,

  
INVESTIGATOR - DIANNE C. MITCHELL

**RECOMMENDATION:**

Pay \$ \_\_\_\_\_ Advertise X Account charged: 1A01 \_\_\_\_\_ 2J01 \_\_\_\_\_ 2H01 \_\_\_\_\_  
Claims Manager:  Concur/date 08-01-01  
Committee Action: \_\_\_\_\_ Council Action \_\_\_\_\_



**GE Capital**  
Fleet Services

Three Capital Drive, Eden Prairie, MN 55344  
952 828-1000

**June 27, 2001**

CITY OF ATLANTA DEPARTMENT OF FIRE  
ATTN: AUTO CLAIMS DEPT  
675 PONCE DE LEON AVE, 2ND FLR  
ATLANTA, GA 30308  
US

*M. F. Hill*  
*07/19/01*  
*DM*

**ENTERED - 7-19-01 - SB**  
**01L0458 - DIANNE MITCHELL**

RE: Our Claim Number: 11405  
Our Client: PPG AUTO GLASS  
Date of Loss: 04/24/2000

We have been retained to represent the interest of PPG AUTO GLASS. Our records show you are responsible for damages in the amount of \$ 1,927.49 as a result of the incident which occurred on 04/24/2000.

If you were insured on 04/24/2000, please have your insurance company contact us without further delay. You may also complete the bottom portion of this letter and return it to our office at the address above. If you were not insured, kindly forward payment for this loss to GE Capital Fleet Services, Attention: Accident Services Subrogation Department, PO Box 44835 - Eden Prairie, MN 55344-9551. You may also telephone us at 1-800-295-7976, and refer to your GECFS Claim #: 11405 to discuss suitable payment arrangements.

You must notify GE Capital Fleet Services within 30 days of receipt of this letter that you dispute this claim or any portion thereof, or we will assume this claim to be valid. If you notify us of your dispute in writing within 30 days of this notice, documentation of this claim will be forward to you for verification. The purpose of this letter is to validate and collect a claim. All information obtained will be used to collect the claim.

Sincerely,

*Jesse Montgomery*

Subrogation Specialist, PH # 800-295-7976 Fax # 952-828-1089  
P4010

INSURANCE CO \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
PHONE# \_\_\_\_\_ AGENT/ADJUSTER \_\_\_\_\_  
POLICY#/CLAIM# \_\_\_\_\_ REPORTED? YES OR NO \_\_\_\_\_

**01-R-1251**